



**New York City
Transit
Authority**

370 Jay Street, Brooklyn, New York, 11201 Phone (718) 330-

*changes to
c 1101
of waste codes
done 10/29/86 ✓*

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October 28, 1986

Mr. Bill Halpert
Permits Administration Branch
United States Environmental Protection Agency
Region II
26 Federal Plaza
New York, N.Y. 10278

NYD980642276

Dear Mr. Halpert:

This letter is a response to our telephone conversation regarding 16 Notification of Hazardous Waste Activity forms submitted by the New York City Transit Authority (NYCTA) in October 1982. The list of the facilities in question and the Identification Numbers are attached.

At this time I request that Section VI of the Notification forms for each of the facilities listed be amended to read that the type of hazardous waste activity is generation. In addition, the description of hazardous waste, Section IX, should be expanded to include cadmium (D006) and waste oil (X001) for each of these facilities.

I will serve as the installation contact for each facility and therefore any questions regarding hazardous waste activities at any NYCTA facility should be directed to my attention. I am located at 370 Jay Street, Room 809, and can be reached at 718-330-4581/4891.

Sincerely,

Nancy Wittenberg

Nancy Wittenberg
Manager
Environmental Safety
System Safety

NBW:ara
EOS#2230F

<u>Facility Name and Address</u>	<u>EPA ID Number</u>
Queens Village Depot 222-22 97th Avenue Queens Village, New York 11429	NYD 98 064 2243 ✓
126th Street Depot 2460 Second Avenue New York, N.Y. 10035	NYD 98 064 2276 ✓
Hudson Depot West 15th Street & 11th Avenue New York, New York 10011	NYD 98 064 2235 ✓
5th Avenue Depot 845 5th Avenue Brooklyn, New York 11232	NYD 98 064 2300 ✓
Jamaica Depot 165-18 South Road Jamaica, New York 11433	NYD 98 064 2268 ✓
100th Street 1552 Lexington Avenue New York, New York 10029	NYD 98 064 2227 ✓
Castleton Depot 1390 Castleton Avenue Staten Island, New York 11429	NYD 98 064 2250 ✓
146th Street Depot 721 Lenox Avenue New York, New York 10039	NYD 98 064 2219 ✓
Crosstown Annex 65 Commercial Street Brooklyn, New York 11222	NYD 98 064 2326 ✓
West Farms Depot 1801-1825 Boston Road Bronx, New York 10460	NYD 98 064 2367 ✓
Flatbush Depot 4901 Fillmore Avenue Brooklyn, New York 11234	NYD 98 064 2318 ✓
Coliseum Depot 1000 East Tremont (177th) St. Bronx, New York 10460	NYD 98 064 2359 ✓
Yukon Depot 40 Yukon Avenue Staten Island, N.Y. 10314	NYD 98 064 2284 ✓

Facility Name and Address

EPA ID Number

Amsterdam Depot
1381 Amsterdam Avenue
New York, New York 10027

NYD 98 064 2342 ✓

Ulmer Park Depot
2449 Harway Avenue
Brooklyn, N.Y. 11214

NYD 98 064 2292 ✓

Walnut Depot
900 East 132nd Street
Bronx, New York 10454

NYD 98 064 2334 ✓

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

INSTALLATION'S EPA I.D. NO.

I. NAME OF INSTALLATION

II. INSTALLATION MAILING ADDRESS

III. LOCATION OF INSTALLATION

PLEASE PLACE LABEL IN THIS SPACE

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED
(yr., mo., & day)

F NYD980642276

A

820521

I. NAME OF INSTALLATION

NEW YORK CITY TRANSIT AUTHORITY

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

325 JAMAICA AVENUE

CITY OR TOWN

4 BROOKLYN

ST.

ZIP CODE

NY 11207

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

52460 2ND AVENUE

CITY OR TOWN

6 NEW YORK NEW YORK

ST.

ZIP CODE

NY 10035

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

2 FEIL GARY SENIOR CHEMIST

212-498-8149

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8 CITY OF NEW YORK

B. TYPE OF OWNERSHIP
(enter the appropriate letter into box)F = FEDERAL
M = NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

☐ A. GENERATION☐ B. TRANSPORTATION (complete item VII)☐ C. TREAT/STORE/DISPOSE☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR☐ B. RAIL☐ C. HIGHWAY☐ D. WATER☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION☐ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
D 0 0 8					
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

13	14	15	16	17	18
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

[illegible]

☐ 1. IGNITABLE
(D001)

☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D000)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

NAME & OFFICIAL TITLE (type or print)

DATE SIGNED

C.J. Milau
General Superintendent